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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing OR Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	MT 100
First Named Inventor	Stephen T. Sonis
COMPLETE IF KNOWN	
Application Number	09 / 265,299
Filing Date	March 9, 1999
Group Art Unit	1614
Examiner Name	Delacroix Muirheid, C.

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHODS AND COMPOSITIONS FOR TREATING AND PREVENTING MUCOSITIS

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

(if applicable).

Application Number

and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	—

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below

Application Number(s)	Filing Date (MM/DD/YYYY)	Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto
60/077,977	03/13/1998	

[Page 1 of 2]

Burden Hour Statement This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO Assistant Commissioner for Patents, Washington, DC 20231

MT 100

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DECLARATION — Utility or Design Patent Application

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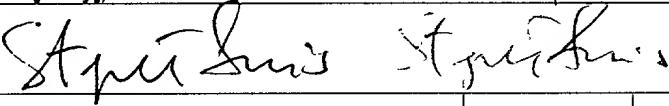
Name Patrea L. Pabst; Arnall Golden & Gregory, LLP

Address 2800 One Atlantic Center

Address 1201 West Peachtree Street

City Atlanta	State GA	ZIP 30309-3450
Country USA	Telephone (404) 873-8794	Fax (404) 873-8795

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Stephen T. (first and middle [if any])		Family Name Sonis or Surname	
Inventor's Signature 		Date 2/15/01	
Residence: City Wayland	State MA	Country US	Citizenship US
Mailing Address Eight Decatur Lane			
Mailing Address			
City Wayland	State MA	ZIP 01778	Country US
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Edward G. (first and middle [if any])		Family Name Fey	
Inventor's Signature		Date	
Residence: City Boston	State MA	Country US	Citizenship US
Mailing Address 42 Commonwealth Avenue, Apartment 3			
Mailing Address			
City Boston	State MA	ZIP 02116	Country US

— Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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PTO/SB/81 (10-00)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	Continuation of 09/265,299
Filing Date	March 7, 2001
First Named Inventor	Stephen T. Sonis
Group Art Unit	
Examiner Name	
Attorney Docket Number	MT 100 CON

I hereby appoint:

Practitioners at Customer Number Place Customer Number Bar Code Label here

OR

Practitioner(s) named below:

Name	Registration Number
Patrea L. Pabst	31,284
Zhaoyang Li	46,872

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

The above-mentioned Customer Number.

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Patrea L. Pabst; Arnall Golden & Gregory, LLP		
Address	2800 One Atlantic Center		
Address	1201 West Peachtree Street		
City	Atlanta	State	GA
Country	USA	Zip	30309-3450
Telephone	(404) 873-8794	Fax	(404) 873-8795

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Mucosal Therapeutics LLC
Signature	
Date	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 1 forms are submitted.

STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Stephen T. Sonis and Edward G. FeyApplication No./Patent No.: 09/265,299 Filed/Issue Date: March 9, 1999Entitled: METHODS AND COMPOSITIONS FOR TREATING AND PREVENTING MUCOSITISMucosal Therapeutics LLC, a Corporation,

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

- the assignee of the entire right, title, and interest; or
- an assignee of an undivided part interest

in the patent application/patent identified above by virtue of either:

A. An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

OR

B. A chain of title from the inventor(s) of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____
The document was recorded in the Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.
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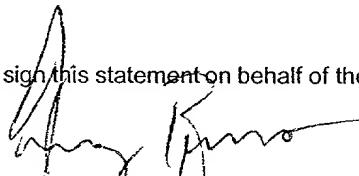
 Additional documents in the chain of title are listed on a supplemental sheet. Copies of assignments or other documents in the chain of title are attached.

[NOTE] A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the PTO. See MPEP 302-302.8

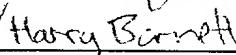
The undersigned (whose title is supplied below) is empowered to sign this statement on behalf of the assignee.

July 27, 1999

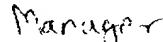
Date



Signature



Typed or printed name



Title